

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		25	04-15-99

INDEX OF CLAIMS

✓ Rejected
 - Allowed
 - (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 sheets
 staple additional sheet here
BEST AVAILABLE COPY
 (LEFT INSIDE)